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SEP 1 9 2007

Rev. 02/02/06

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FEE TRANSMITTAL	Application Number:			0/789,487	
For FY 2007				2/26/2004	
Patent fees are subject to annual revision	First	Named Invento	or; J	ohn C. Martin	
Applicant claims small entity status. See 37 CFR 1.27		niner Name:		Abolfazi Tabata	ıbai
				624	
TOTAL AMOUNT OF PAYMENT: \$225,00	Attor	ney Docket No	.: S	3-100,597	
METHOD OF PAYMENT (check all that apply)	·	FEE	CALICULE MOTO	PCHONITATION OF THE PARTY OF TH	0008 122150 1870)
 The commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 12-2150 Deposit Account Name: Los Alamos National Laboratory Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17 	Entity En	nail tity Fee ± (3)	61 FC:£252 Fee Descriptionary	_	
FEE CALCULATION	1052 \$50 2052	\$25 Surcha	arge - late prov	risional filing fee	or cover sheet
	1812 \$25201812	\$2520 For fill	ng a request fo	or reexamination	
1. COMBINED FILING FEE	1251 \$120 225	\$60 Extens	sion for realy w	ithin first month	ļ
Large Entity Small Entity Fee Fee Pee Description Fee Paid	1			within second :	month \$225
1001 \$300 2001 \$150 Basic Filling fee \$0.00			· -		1
1004 \$300 2004 \$150 Reissue Filing fee \$	1253 \$1020 22			within third mor	1
1111 \$500 2111 \$250 Search Fee \$0.00	1254 51590 2254	\$795 Exten	sion for reply w	vithin fourth mon	th
1311 \$200 2311 \$100 Examination Fee \$0.00 1005 \$200 2005 \$100 Provisional Filing Fee	1255 \$2160 2255	\$1080 Extens	sion for reply w	ithin fifth month	
1085 \$250 2085 \$125 Provisional Size Fee	1401 \$500 240		ce of Appeal		,
(for each additional 50 sheets that exceeds 100 sheets)	1402 \$500 240		• • •	port of an appea	1
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SUBTOTAL (1) \$0.00	1403 \$1000 24		quest for oral h	-	
2. EXTRA CLAIM FEES/APPLICATION SIZE FEE	1452 \$500 245	2 \$250 Peti	tion to revive -	unavoidable	
Extra Fee from Fee Paid	1814 \$110 281	4 \$55 Term	inal Disclaimer	•	Į
Claims Below	1453 \$1500 2453	\$750 Petiti	ion to revive -	unintentional	
Total Claims —20** = X = \$0.00 Independent —3 ** = X = \$0.00	1480 \$130 148	s130 Peti	tions to the Dire	ector	
Claims	1808 \$180 180				In Clainman
Multiple Dependent X 180 = \$0.00	·	1808 \$180 1808 \$180 Submission of Information Disclosure 5 1809 \$790 2808 \$395 Filing a submission after final rejection (37 CFR 1.129 (a))			
or number previously paid, if greater; For Reissues, see below		•	` •·		
Large Small Entity Entity	1810 \$790 281		each additions nined (37 CFR	l invention to be	
Fee Fee Fee Description	484 \$400		-		
1202 \$50 2202 \$25 Claims in excess of 20	1811 \$100 181		ificate of Corre		
1201 \$200 2201 \$100 Independent claims in excess of 3 1203 \$360 2203 \$180 Multiple dependent claim, if not	1604 \$300 150			earty, voluntary, on/Republication	
paid.	1801 \$790 280			ued Examination	
1204 \$200 2204 \$100 Reissue independent claims in excess of 3 over original patent	Other fee (spe				
1205 \$50 2205 \$25 Reissue claims in excess of 20		<u></u>			
over original patent		SUBTO)TAL (3)		\$225.00
Total Claims Fee \$_0.00 APPLICATION SIZE FEE	Reduced by Basic	Filing Fee Pald			
1081 \$250 2081 \$125.00 For each additional 50 sheets					
that exceed 100 sheets.			TAL FROM		\$ 0.00
Including specification and			TAL FROM		\$ 0.00
drawings		SOBIC	TAL FROM	3	\$225.00
SUBTOTAL (2) \$ 0.00 (Include total of Claims Fees and Size Fee here)		-	. AMQUNT O otal amount at t	OF PAYMENT top of page)	\$225.00
SUBMITTED BY		******* ******************************	1	<u> </u>	- (23 (2-2 - 1 - 3
				Complete (if applicable)	
Printed Name: Samuel L. Borkowsky			,	Reg. No.	42,346
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